

21648

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/420,991
Filing Date	October 20, 1999
First Named Inventor	Jonathan Kepes
Group Art Unit	2164

Examiner Name JUN 19 2002

Total Number of Pages in This Submission

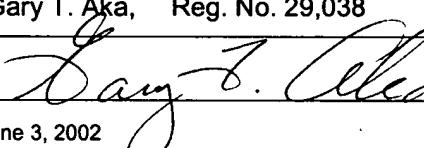
Attorney Docket Number 018477-00012 Technology Center 2100

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ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Postcard <input type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>
		Remarks      The Commissioner is authorized to charge any additional fees to Deposit Account 50-1957.

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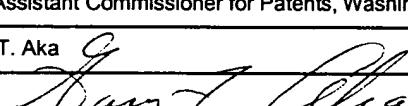
## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm and Individual name	Law Offices of Gary T. Aka Gary T. Aka, Reg. No. 29,038	JUN 27 2002
Signature		
Date	GROUP 3000	
June 3, 2002		

GROUP 3000

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: June 3, 2002

Typed or printed name	Gary T. Aka
Signature	
	Date
	June 3, 2002

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# FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 200

Complete if Known

Application Number 09/420,991

Filing Date October 20, 1999

First Named Inventor Jonathan Kepecs

Examiner Name J. Patel

Group Art Unit 2164

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JUN 19 2002

Technology Center 2100

## METHOD OF PAYMENT (check one)

1.  The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number

50-1957

Deposit Account Name

Law Offices of Gary T. Aka

 Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 Applicant claims small entity status. See 37 CFR 1.272.  Payment Enclosed: Check     Credit card     Money Order     Other

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

## SUBTOTAL (1) (\$)

## 2. EXTRA CLAIM FEES

Total Claims	-20**	=	Extra Claims	X	Fee from below	=	Fee Paid
Independent Claims	-3**	=		X		=	
Multiple Dependent	3			X		=	

## Large Entity Small Entity

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

## SUBTOTAL (2) (\$)

## FEE CALCULATION (continued)

3. ADDITIONAL FEES	Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
	105	130	205	65	Surcharge - late filing fee or oath	
	127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
	139	130	139	130	Non-English specification	
	147	2,520	147	2,520	For filing a request for reexamination	
	112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
	113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
	115	110	215	55	Extension for reply within first month	
	116	400	216	200	Extension for reply within second month	200
	117	920	217	460	Extension for reply within third month	
	118	1,440	218	720	Extension for reply within fourth month	
	128	1,960	228	980	Extension for reply within fifth month	
	119	320	219	160	Notice of Appeal	
	120	320	220	160	Filing a brief in support of an appeal	
	121	280	221	140	Request for oral hearing	
	138	1,510	138	1,510	Petition to institute a public use proceeding	
	140	110	240	55	Petition to revive – unavoidable	
	141	1,280	241	640	Petition to revive – unintentional	
	142	1,280	242	640	Utility issue fee (or reissue)	
	143	460	243	230	Design issue fee	
	144	620	244	310	Plant issue fee	
	122	130	122	130	Petitions to the Commissioner	
	123	50	123	50	Petitions related to provisional applications	
	126	180	126	180	Submission of Information Disclosure Stmt	
	581	40	581	40	Recording each patent assignment per property (times number of properties)	
	146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
	149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
	179	740	279	370	Request for Continued Examination (RCE)	
	169	900	169	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ 200)

\*\*or number previously paid, if greater; For Reissues, see above

The Commissioner is authorized to charge any additional fees to the above noted Deposit Account.

## SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Gary T. Aka	Registration No. Attorney/Agent)	29,038	Telephone	(650) 564-9888
Signature				Date	June 3, 2002

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PATENT &amp; TRADEMARK OFFICE

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Applicant claims small entity status. See 37 CFR 1.27

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Technology Center 2100

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Other fee (specify) _____				

\*Reduced by Basic Filing Fee Paid **SUBTOTAL (3) (\$ 200)**

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